FORM MR-TRS Revised 03/31/2009

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION of OIL, GAS and MINING

1594 West North Temple, Suite 1210 Box 145801 Salt Lake City, Utah 84114-5801 (801) 538-5291

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# APPLICATION FOR TRANSFER OF NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

Application is hereby made to transfer the pern	nit to commence small mining operations for the
Butler Valley	project, permit # S/ <u>025_/0016_</u> , currentl
operated by Alpine Gems & Minerals	(transferor)
to Alpine Gems LLC	(transferee)

As used herein, TRANSFEROR refers to the <u>current operator</u>; TRANSFEREE refers to the <u>proposed new operator</u>; NOI refers to the Notice of Intention to Commence Small Mining Operations; PERMIT refers to the approved (or accepted) NOI, including the reclamation contract and reclamation surety.

Upon approval of the Application for Transfer:

- 1. The Transferor agrees to transfer all rights and obligations to operate under the terms of the NOI to the Transferee, The Transferor will not retain any rights to conduct small mining operations within the area covered by the approved NOI.
- Both parties understand the transfer of the NOI is not complete until all the
  applicable requirements are met, including the submittal and Division approval of
  an appropriate reclamation surety and a reclamation contract.
- 3. The transferee has read and has a copy of the current NOI.
- 4. The Transferee has inspected the site and is fully aware of all existing conditions and responsible for compliance with the conditions of the permit and the obligations regardless of the nature of the conditions at the site.
- 5. Transferee shall conduct large mining operations on lands included in the NOI in accordance with the Utah Mined Land Reclamation Act, (ACT) Sections 40-8-1 et seq., Utah Code Annotated, (2005, as amended), and the rules promulgated under the ACT (R647- et seq., and the approved NOI.
- 6. The Transferee shall provide a surety in a form and amount approved by the Division to assure reclamation of the lands affected by the mining operations.

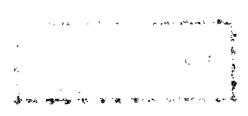
The **Transferor** will remain liable for compliance at the mine site until this transfer application is approved.

50250016 TaskID#6569 cc: Lynn The signatory below represents that he/she has authority to execute this transfer on behalf of the Transferor, if not a natural person. Statements made in the application are true and correct to the best of my knowledge and belief.

Alpine Gems & Minerals	
Operator/Transferor Name	
<sub>By</sub> ArJean Lamoreaux	
Name of Authorized Officer (Typed or Printed)	
Owner	
Title of Authorized Officer	
(1) Dage 2 M/ And By 2 (1) + 3/28/15	
Officer's Signature Date	
STATE OF Utah)	
COUNTY OF/von)	
On the 20 day of March, 20 15, ArJean Lamoreaux	<b>(</b>
personally appeared before me, who being by me duly sworn did s	ay that he/she is
an Owner (owner, officer, director, partner, agent	or other (specify))
of the Operator Alpine Gems LLC	of a sid On a nata ii
and duly acknowledged that said instrument was signed on behalf by authority of its bylaws, a resolution of its board of directors, or a	
be required to execute the same with full authority and to be bound	
so roquired to exceed the carrie man authority and to se seam	
Notary Public  BRENDA FORSYTH  Notary Public	
Notary Public  Notary Public  State of Utah	
Residing at Comm. No. 656878  My Comm. Expires Jun 28, 2016	•
Trestaining at	4
My Commission Expires:	
My Commission Expires:	

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TRANSFEROR:



The signatory below represents that he/she has authority to execute this transfer on behalf of the Operator/Transferee, if not a natural person; and the operator/transferee is a properly organized entity in good standing under the laws of Utah and the United States, is registered as an entity authorized to do business in the State of Utah. Statements made in the application are true and correct to the best of my knowledge and belief.

TRANSFEREE:	
Alpine Gems LLC	
Operator/Transferee Name	
<sub>By</sub> Ben Lamoreaux	
Name of Authorized Officer (Typed or Printed)	
LLC Member Manager	
Title of Authorized Officer	
Sel Louis	3/28/2015
Officer's Signature	Date
STATE OF — Utah —	
	) ss:
COUNTY OF /ran	)
On the <u>16</u> day of <u>March</u> , 20 <u>15</u> ,	
personally appeared before me, who being an (owner, officer,	
of the Operator Alpine Gems LLC	director, partitler, agent of other (specify))
and duly acknowledged that said instrume	nt was signed on behalf of said Operator
by authority of its bylaws, a resolution of its	-
be required to execute the same with full a	uthority and to be bound hereby.
and	BRENDA FORSYTH
Notary Public	Notary Public State of Utah
Cedar City, Utah	Comm. No. 656878  My Comm. Expires Jun 28, 2016
Residing at	my Comm. Capitos sun Ed. 2010
6-28-H	
My Commission Expires:	

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Form MR-SMO (Revised July 25, 2012)

I.

For Division Use Only	
Assigned File Number	S//
DOGM Lead:	

## STATE OF UTAH **DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING**

1594 West North Temple Suite 1210 Box 145801 Salt Lake City, Utah 84114-5801 Telephone: (801) 538-5291 Fax: (801) 359-3940

#### NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

The information requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1987, and the General Rules as promulgated under the Utah Minerals Regulatory Program (R647). The rules and Act are available online at <a href="http://www.rules.utah.gov/publicat/code/r647/r647.htm">http://www.rules.utah.gov/publicat/code/r647/r647.htm</a> and http://le.utah.gov/~code/TITLE40/40\_08.htm.

"Small Mining Operations" are operations which have a disturbed area of ten or fewer surface acres at any time in unincorporated areas, or five acres or fewer in incorporated areas.

## **GENERAL INFORMATION** (Rule R647-3-104) 1. Name of Mine: Butler Valley 2.A. Name of Entity Applying for a Permit: Alpine Gems LLC Contact (Authorized Officer): Ben Lamoreaux Mailing Address: 2686 N. 775 W. City, State, Zip: Cedar City, Utah 84721 Phone: 435-586-0174 \_\_\_\_\_ Fax: 435-865-1848 E-mail Address: blamoreaux@laeng.com LLC Sole Proprietorship (dba) Individual Entity is a: Corporation Partnership ( General or limited) Other (specify type) \_\_\_\_\_ Business Entity (not individuals) must be registered (and maintain registration) with the State of Utah, Division of Corporations (DOC) If not currently registered, contact www.commerce.utah.gov to renew or apply. 2.B. Are you currently registered to do business in the State of Utah? Ves No Business Entity #: 7341684-0160 Local Business License #: 1100-BL (if required) Issued by: County: \_\_\_\_\_ or City: Parowan Registered Utah Agent (as identified with the Utah DOC) (if individual leave blank): Name: \_\_\_\_\_ Title: \_\_\_\_\_ Address: \_\_\_ City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address:

2.C. Entity's Representative(s) (if different from #2A) authorized and designated to receive notices of violation, cessation orders, and all other notices to be given to the permittee or operator by the Division. \_\_\_\_\_\_ Title: \_\_\_\_\_ Name: Address: City, State, Zip: \_\_\_\_\_\_ Fax: \_\_\_\_\_ Emergency, Weekend, or Holiday Phone: E-mail Address: Title: \_\_\_\_\_ Name: Address: City, State, Zip: \_\_\_\_\_ Fax: \_\_\_\_\_ Emergency, Weekend, or Holiday Phone: E-mail Address: 3a.. If Business is a Sole Proprietor (dba) or Individual: Name of Owner: \_\_\_\_\_ Title: \_\_\_\_\_ Business Address: City, State, Zip: \_\_\_\_\_\_ Fax: \_\_\_\_\_ E-mail Address: 3b. If Business is a Corporation: Name of Officers: \_\_\_\_\_\_ Title: \_\_\_\_\_ Name: \_\_\_\_\_ Title: \_\_\_\_\_ Name: \_\_\_\_\_\_ Title: \_\_\_\_\_ Name: \_\_\_\_\_\_ Title: \_\_\_\_\_ Headquarters Address: City, State, Zip: Phone: \_\_\_\_\_ Fax: \_\_\_\_ E-mail Address: Member Managed Manager Managed 3c. If Business is a Limited Liability Company: Name of 1<sup>st</sup> Member/Manager: Ben Lamoreaux Title: LLC Member Manager Business Address: 2686 N. 775 W. City, State, Zip: Cedar City, Utah 84721 Phone: 435-586-0174 Fax: 435-865-1848 E-mail Address: blamoreaux@laeng.com Name of 2<sup>nd</sup> Member/Manager: Laurie Perry Title: LLC Member Manager Business Address: 2686 N. 775 W.
City, State, Zip: Cedar City, Utah 84721 Phone: 435-586-0174 Fax: 435-865-1848 E-mail Address: lightplanter@gmail.com 3d. If Business is a Partnership: Names of First Partner: Business Address: City, State, Zip: \_\_\_\_\_ Fax: \_\_\_\_\_ Phone: E-mail Address: \_\_\_\_ Names of Second Partner: Business Address: City, State, Zip: Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail Address:

## VII. SIGNATURE REQUIREMENT

### CERTIFICATION

I state under penalty of perjury under the laws of the state of Utah and the United States of America that:

- a. I have read this form and declare the information, statements and/or documentation are true, correct and complete to the best of my knowledge and belief; AND
- b. I commit to the reclamation of the aforementioned small mining project as required by the Utah Mined Land Reclamation Act (40-8) and the rules as specified by the Board of Oil, Gas and Mining.
- c. **This certification must be signed by:** (1.) an executive officer if the applicant is a corporation; (2.) a partner if applicant is a partnership (general or limited); (3.) the owner if applicant is a sole proprietorship; **or** (4.) the member or manager if applicant is a limited liability company.

Signature:	Date: 3/28/15
Name (typed or printed): Ben Lamoreaux	
Title/Position (if applicable): LLC Member Manager	

